	Under the Paper	Work Reduction Ac	Mos; U.S. DEPARTMENT OF COMMERCIES it displays a valid OMB control number Application or Docket Number							
		· · · · · · · · · · · · · · · · · · ·		litute for Form P  D - PART I	10-075			1.1	0-7144	85
_	·	SMALL	SMALL ENTITY		OTHER THAN SMALL ENTITY					
B	FOR ASIC FEE	NUM	BER FILE	D NUM	NUMBER EXTRA		FEE	]	RATE	FEE
(3	7 CFR 1.16(a))						15	OR		
(3	OTAL CLAIMS 7 CFR 1.16(c))		// minus 20 =				<del> </del>	1	\	<del>  •</del>
	DEPENDENT CL 7 CFR 1.16(b))	AIMS 2	2 minus 3 =		e .		<del> </del>	OR	X \$E	<del></del>
м	ULTIPLE DEPEND	DENT CLAIM PRES		(37 CFR 1.16(d))		X \$=	<del> </del>	OR	X \$=	-
		+\$=	<del> </del>	OR	+ \$ =	<del> </del>				
"	* If the difference in column 1 is less than zero, enter *0* in column 2.					TOTAL	L	OR	TOTAL	L
	) 1. (l	CLAIMS AS AN	<b>NENDE</b>	D - PART II						
-	2 02 04 (Column 1) (Column 2)				(Column 3)	SMALL	ENTITY	OR	OTHE SMALL	R THAN . ENTITY
ENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE	] ·	RATE	ADDI- TIONAL
MO	Total (37 CFR 1.16(c))	17	Minus	20		X \$ =	FEE	22		FEE
		2	Minus	3	- ·	x \$ =		OR	X \$ =	
A	FIRST PRESEN	TATION OF MULTIP	E DEPEND	DENT CLAIM (37 CI	FR 1.16(d))			OR	X \$=	
				<del></del>		+s =		OR	+ \$ = TOTAL	
				•		ADD'L FEE		OR	ADD'L FEE	L
	T	(Column 1)	T	(Column 2) HIGHEST	(Column 3)					
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
$\overline{\underline{0}}$	Total (37 CFR 1.16(c))		Minus	••	=	X \$ =		OR	X \$ =	FEE
JEN	Independent (37 CFR 1.16(b))	•	Minus	•••	=	X \$ =	-			
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+s =		OR	X \$=	<del></del>
								OR	+s=	
						ADD'L FEE		OR	ADD'L FEE	·
,,]		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)		,			
AMENDMENT C		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL
[0	Total (37 CFR 1.16(c))		Minus	••	=	x \$=		OR	x \$_ =	FEE
	Independent (37 CFR 1.16(b))	•	Minus	•••	= .	x \$ =		Ī		
₹ſ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+\$ =		OR	× \$=	
								OR	+ \$ =	
•	If the entry in ∞	lumn 1 is less than	the entry	In column 2. write	*O* In column 3	ADD'L FEE		OR	ADD'L FEE	
	II Ine Highest N	lumber Previously umber Previously I	Pald For	IN THIS COACE IS	foce then 20	ter *20*.				

The Highest Number Previously Paid For (Total or Independent) Is the highest number found in the appropriate box in column 1 The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.